

**Effective October 1, 2001**

Application or Docket Number

~~Q.B. 400978-000~~

| (Column 1) | (Column 2) |
|------------|------------|
| 1          | 2          |
| 3          | 4          |
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| 7          | 8          |
| 9          | 10         |
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| 93         | 94         |
| 95         | 96         |
| 97         | 98         |
| 99         | 100        |

|                                  |               |                          |
|----------------------------------|---------------|--------------------------|
| TOTAL CLAIMS                     | 53            |                          |
| FOR                              | NUMBER FILED  | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 53 minus 20 = | 33                       |
| INDEPENDENT CLAIMS               | 6 minus 3 =   | 3                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |               | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

| (Column 1) | (Column 2) | (Column 3) |
|------------|------------|------------|
| 1          | 2          | 3          |
| 4          | 5          | 6          |
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| 37         | 38         | 39         |
| 40         | 41         | 42         |
| 43         | 44         | 45         |
| 46         | 47         | 48         |
| 49         | 50         | 51         |
| 52         | 53         | 54         |
| 55         | 56         | 57         |
| 58         | 59         | 60         |
| 61         | 62         | 63         |
| 64         | 65         | 66         |
| 67         | 68         | 69         |
| 70         | 71         | 72         |
| 73         | 74         | 75         |
| 76         | 77         | 78         |
| 79         | 80         | 81         |
| 82         | 83         | 84         |
| 85         | 86         | 87         |
| 88         | 89         | 90         |
| 91         | 92         | 93         |
| 94         | 95         | 96         |
| 97         | 98         | 99         |
| 100        | 101        | 102        |
| 103        | 104        | 105        |
| 106        | 107        | 108        |
| 109        | 110        | 111        |
| 112        | 113        | 114        |
| 115        | 116        | 117        |
| 118        | 119        | 120        |
| 121        | 122        | 123        |
| 124        | 125        | 126        |
| 127        | 128        | 129        |
| 130        | 131        | 132        |
| 133        | 134        | 135        |
| 136        | 137        | 138        |
| 139        | 140        | 141        |
| 142        | 143        | 144        |
| 145        | 146        | 147        |
| 148        | 149        | 150        |
| 151        | 152        | 153        |
| 154        | 155        | 156        |
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| 172        | 173        | 174        |
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| 355        | 356        | 357        |
| 358        | 359        | 360        |
| 361        | 362        | 363        |
| 364        | 365        | 366        |
| 3          |            |            |

| AMENDMENT A                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR |       | PRESENT<br>EXTRA |
|--|---|-------|---|-------|------------------|
|  | Total                                     | • 54  | Minus                                       | ** 53 | = 1              |
| Independent                                    | • 5                                       | Minus | *** 6                                       | =     |                  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       |   |       |                  |

OR OTHER THAN SMALL ENTITY

| RATE      | FEE    |    | RATE      | FEE    |
|-----------|--------|----|-----------|--------|
| BASIC FEE | 370.00 | OR | BASIC FEE | 740.00 |
| X\$ 9=    |        | OR | X\$18=    | 594    |
| X42=      |        | OR | X84=      | 252    |
| +140=     |        | OR | +280=     |        |
| TOTAL     |        | OR | TOTAL     | 1584   |

| RATE                | ADDITIONAL FEE |    | RATE                | ADDITIONAL FEE |
|---------------------|----------------|----|---------------------|----------------|
| X\$ 9=              |                | OR | X\$18=              | 18.00          |
| X42=                | -              | OR | X84=                |                |
| +140=               |                | OR | +280=               |                |
| TOTAL<br>ADDIT. FEE |                | OR | TOTAL<br>ADDIT. FEE | 18.00          |

|     | (Column 1) | (Column 2) | (Column 3) |
|-----|------------|------------|------------|
|     | CLAIMS     | HIGHEST    |            |
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| AMENDMENT B                                    | REMAINING<br>AFTER<br>AMENDMENT |       | NUMBER<br>PREVIOUSLY<br>PAID FOR |    | PRESENT<br>EXTRA |
|--|---------------------------------|-------|----------------------------------|----|------------------|
|  | Total                           | *     | Minus                            | ** | =                |
| Independent                                    | +                               | Minus | ***                              | =  |                  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                 |       |                                  |    |                  |

| RATE                | ADDITIONAL FEE |    | RATE                | ADDITIONAL FEE |
|---------------------|----------------|----|---------------------|----------------|
| X\$ 9=              |                | OR | X\$18=              |                |
| X42=                |                | OR | X84=                |                |
| +140=               |                | OR | +280=               |                |
| TOTAL<br>ADDIT. FEE |                | OR | TOTAL<br>ADDIT. FEE |                |

| (Column 1) | (Column 2) | (Column 3) |
|------------|------------|------------|
| CLAIMS     | HIGHEST    |            |

| AMENDMENT C                                    | REMAINING AFTER AMENDMENT |       | NUMBER PREVIOUSLY PAID FOR |  | PRESENT EXTRA |
|--|---------------------------|-------|----------------------------|--|---------------|
|  |                           |       |                            |  |               |
| Total  | *                         | Minus | **                         |  | α             |
| Independent                                    | *                         | Minus | ***                        |  | α·            |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                           |       |                            |  |               |

|                     |                |    |                     |                |
|---------------------|----------------|----|---------------------|----------------|
| RATE                | ADDITIONAL FEE | OR | RATE                | ADDITIONAL FEE |
| X\$ 9=              |                |    | X\$18=              |                |
| X42=                |                |    | X84=                |                |
| +140=               |                |    | +280=               |                |
| TOTAL<br>ADDIT. FEE |                | OR | TOTAL<br>ADDIT. FEE |                |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- \*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.